Flathead County Health Department

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Well & Informed

Coalition for a Healthy Flathead

Inside this issue:

Let's Celebrate! Smokefree MONTANA

Lights Out for Light Cigarettes

On June 22, 2010, so-called "light" cigarettes will finally be snuffed out. This action marks the one year anniversary of the day President Obama signed a law giving the U.S. Food and Drug Administration the power to regulate how the tobacco industry packages and advertises tobacco. This is a major victory for public health.

"Light," "low" and "mild" cigarettes have finally be snuffed out- decades after they were introduced by the tobacco companies to deceive the American public and sustain addiction to cigarettes by implying that these products were safer for smokers. As required by the Family Smoking Prevention and Tobacco Control Act, the tobacco industry will no longer be allowed to manufacture these products as of June 22.

The American Lung Association and other tobacco control and prevention groups are now calling on the FDA to stop Big Tobacco's attempt to find a way around this new requirement. Knowing that the end of the use of misleading health descriptors, like "light" and "low tar" was coming, the tobacco companies engaged in marketing campaigns to make consumers associate specific colors with the banned descriptors, as well

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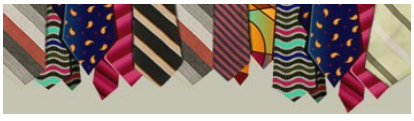
Cancer and Men

Every year, cancer claims the lives of nearly 300,000 men in America. There are ways to reduce the risk for some of the most common types of cancer in men.

In 2006, the most recent year for which statistics are available, more than 700,000 men in the United States were told they had cancer, and more than 290,000 died from it. Due to advances in early detection and treatment, more men who are diagnosed with cancer are surviving each year.

Lung Cancer

More men in the U.S. die from lung cancer than any other type of cancer. About 9 out of every 10 lung cancer deaths in men in this country are due to smoking. The most important thing you can do to prevent lung cancer is to not start smoking, or to quit if you smoke. You can also reduce your risk of lung cancer by avoiding other people's smoke and testing your home for radon.



Prostate Cancer

Prostate cancer is the most common cancer in men in the U.S., not counting skin cancer. It is the sec

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Men

ond most common cause of cancer death in men.

While all men are at risk for prostate cancer, some factors increase risk. These include older age, a family history of prostate cancer, and being African American.

Not all medical experts agree that screening for prostate cancer saves lives. Currently, there is not enough evidence to decide if the potential benefits of prostate cancer screening outweigh the potential risks. Given the uncertainty about the benefit of screening, CDC supports informed decision making. Informed decision making occurs when a man—

* Understands the nature and risk of prostate cancer.
* Understands the risks of, benefits of, and alternatives to screening.
* Participates in making the decision to be screened at a level he desires.
* Makes a decision consistent with his preferences and values.

Colorectal (Colon) Cancer

The third leading cause of cancer deaths in American men is colorectal cancer. This cancer is largely preventable through screening. Screening is recommended for men and women beginning at age 50. Screening tests for colorectal cancer can find precancerous polyps so they can be removed before they turn into cancer. Screening tests can also find colorectal cancer early, when treatment works best. People who have a family or personal history of polyps or colorectal cancer, inflammatory bowel disease, or certain genetic syndromes such as familial adenomatous polyposis (FAP) or hereditary non-polyposis colorectal cancer should talk to their doctors about screening earlier or more often than other people.

Skin Cancer

Skin cancer is the most common form of cancer in the United States. The two most common types of skin cancer—basal cell and squamous cell carcinomas—are highly curable. However, melanoma, the third most common skin cancer, is more dangerous. In 2006, more than 5,000 men in the U.S. died of melanomas of the skin. Most skin cancers are caused by exposure to ultraviolet light or sunlight. The best way to avoid skin cancer is to protect your skin from the sun by using sunscreen, seeking shade, and wearing sunglasses, a hat, and sun-protective clothing.

Other Types of Cancer

While these are the major cancers that may affect a man's health, other cancers may affect your health as well. For more information on a specific cancer, visit the National Cancer Institute.

Data source: U.S. Cancer Statistics Working Group. Department of Health and Human Services, Centers for Disease Control and Prevention, and National Cancer Institute; 2010.

Skin Cancer Fast Fact: Tanning and Burning

A tan does not indicate good health. A tan is a response to injury, because skin cells signal that they have been hurt by the sun's UV rays by producing more pigment. People burn or tan depending on their skin type, the time of year, and the amount of time they have spent in the sun. Although everyone's skin can be damaged by too much sunlight, people with skin types that always or easily burn and tan never or minimally are at the highest risk.

Source: Montana Department of Health and Human Services, Montana Cancer Control Programs

Lights Out

as the false health claim linked to them. Along with this color-coding they are also using similar misleading terms such as "smooth" and "silver."

"With a wink and a nod, the tobacco industry has found new ways to continue their deceptive marketing practices to circumvent the new regulations," said Charles D. Connor, president and CEO of the American Lung Association. "For example, they must drop the word 'light' in their packaging, but have already made it clear to their customers that if they want lights, they just need to look for a package in a specific color, such as gold.

This color-coding lets them perpetuate the false and misleading beliefs among consumers that certain brands are less harmful than other cigarettes. We urge the FDA to take corrective action by ruling that this new wording or color coding continues to willfully mislead consumers and should be ended immediately."

In addition to the descriptor ban, the Youth Access and Advertising rule also takes effect June 22, severely restricting Big Tobacco's marketing efforts designed to appeal to children and teenagers. This means vending machine sales are only permitted in adult facilities, and the sale of cigarettes or smokeless tobacco products to minors will be a federal offense. An additional provision requires new, larger and stronger warning labels on all smokeless tobacco packages and smokeless tobacco product advertisements.

Tobacco companies will also be prohibited from sponsoring sporting and other cultural events as well as selling branded products such as T-shirts, representing "an important step toward ending the predatory marketing campaigns by tobacco companies that target our children," said Connor. "Every day 4,000 young people try cigarettes for the first time, and 1,000 of them will become lifelong smokers."

Tobacco costs our country more than $193 billion each year in health care costs and kills more than 433,000 people annually, and while the new ban descriptor law and Youth Access and Advertising rule will help to regulate the $89 billion tobacco industry, helping smokers quit is still a priority.

Source: American Lung Association

New York City has launched an innovative, creative, and thoughtful response to the tobacco industry's use of color coding. →

CDC Finds Higher Levels of Cancer Causing Chemicals in US Brand Cigarettes

People who smoke certain U.S. cigarette brands are exposed to higher levels of cancer-causing tobacco-specific nitrosamines (TSNAs), the major carcinogens and cancer-causing agents in tobacco products, than people who smoke some foreign cigarette brands. This was one of the findings from the first-ever study to compare TSNA exposures among smokers from different countries. CDC researchers compared mouth-level TSNA exposures and urine biomarkers among smokers from the United States, Canada, the United Kingdom, and Australia. Results of this study are published in the June issue of Cancer Epidemiology Biomarkers and Prevention.

The types of tobacco in cigarettes vary by manufacturer and location of production. The U.S. cigarette brands studied contained "American blend" tobacco, a specific mixture of tobacco from the U.S. that contains higher TSNA levels. The Australian, Canadian, and U.K. cigarette brands were made from "bright" tobacco, which is lighter in color and flue-cured. Changes in curing and blending practices could reduce U.S. smokers' exposure to one type of cancer-causing compound; however, this would not necessarily result in a safer product.

Study collaborators enlisted 126 persons from Australia, Canada, the U.K. and the U.S. who smoke cigarettes daily to participate in the study. Cigarettes smoked by study participants represented popular brands in each country.

Scientists measured chemicals in cigarette butts collected by each smoker over a 24-hour period to determine how much of a certain TSNA entered the smokers' mouths during that period. They also collected urine samples from study participants to find out how much breakdown product from this TSNA appeared in the urine. Comparing the results from these two types of sampling showed a correlation between the amount of one TSNA that enters the mouth and the amount of its breakdown product that appears in the urine. This is the first time this relationship has been documented.

This study provides additional evidence about the harmful effects of tobacco use. Insight gained during such studies help identify the different levels of harmful chemicals to which people are exposed as a result of smoking different types of cigarettes.

Source: HealthNewsDigest.com

MONTANA TOBACCO QUIT LINE

1-800-QUIT-NOW

* Free Counseling
* Free Information
* Free Nicotine Replacement
* Reduced cost prescription Chantix & Zyban

Upcoming Events

July 15:	Coalition Meeting
July 16-17:	Bigfork Relay for Life
September:	Childhood Cancer Month, Prostate Cancer Awareness Month, and Ovarian Cancer Awareness Month

Breast Cancer and You:
What You Need to Know

What is breast cancer?

Cancer is a disease in which cells in the body grow out of control. When cancer starts in the breast, it is called breast cancer. The breast is made up of three main parts: glands, ducts, and connective tissue.

Sometimes breast cells become abnormal and grow faster than normal cells. These extra cells form a mass called a tumor. Some tumors are "benign," or not cancerous. Other tumors are "malignant," meaning they are cancerous and have the ability to spread to other parts of the breast and body and disrupt normal functions in those areas.

Who gets breast cancer?

All women are at risk for breast cancer. Men can also get breast cancer, but this is rare. Not counting skin cancer, breast cancer is the most common cancer in women of all combined major racial and ethnic groups in the United States. Among Hispanic women, it is the most common cause of death from cancer, and it is the second most common cause of death from cancer among white, black, Asian or Pacific Islander, and American Indian or Alaska Native women. In 2005, (the most recent year for which statistics are available), 186,467 women were diagnosed with breast cancer, and 41,116 women died from the disease.† Although more white women get breast cancer, more black women die from it.

† U.S. Cancer Statistics Working Group. *United States Cancer Statistics: 1999–2005 Incidence and Mortality Web-based Report.* Atlanta (GA): Department of Health and Human Services, Centers for Disease Control and Prevention, and National Cancer Institute; 2009.

How can I prevent it?

Scientists are studying how best to prevent breast cancer. Ways to help you lower your risk of getting breast cancer include the following:

- Stay physically active by getting regular exercise.
- Maintain a healthy weight.
- Avoid using hormone replacement therapy (HRT), or find out the risks and benefits of HRT and if it is right for you.
- Limit the amount of alcohol that you drink.

What raises a woman's chance of getting breast cancer?

There are several factors that may affect your risk of developing breast cancer. These include:

- Getting older.
- Not having children, or having your first child later in life.
- Starting your first menstrual period at an early age.
- Beginning menopause at a late age.
- Having a personal history of breast cancer or certain benign breast diseases, such as atypical ductal hyperplasia.
- Having close family relatives (such as a mother, sister, father, or daughter) who have had breast cancer.
- Having a genetic condition, such as certain mutations in your BRCA1 or BRCA2 genes.
- Having been treated with radiation therapy to the breast or chest.
- Being overweight, particularly after menopause.
- Using hormone replacement therapy for a long time.
- Using oral contraceptives.
- Drinking alcohol.
- Being physically inactive.

What are the symptoms?

When breast cancer starts out, it is too small to feel and does not cause signs and symptoms. As it grows, however, breast cancer can cause changes in how the breast looks or feels. Symptoms may include:

- **A new lump in the breast.**
- **A lump that has changed.**
- **A change in the size or shape of the breast.**
- **Pain in the breast or nipple that does not go away.**
- **Flaky, red, or swollen skin anywhere on the breast.**
- **A nipple that is very tender or that suddenly turns inward.**
- **Blood or any other type of fluid coming from the nipple that is not milk when nursing a baby.**

If you have any of these symptoms, talk to a health care professional. They may be caused by something other than cancer, but the only way to know is to see a health care professional.

1-800-CDC-INFO (232-4636) • www.cdc.gov/cancer/breast

What you should know about getting a mammogram

Is there a test that can find breast cancer early?

Mammograms are the best tests for finding breast cancer early. Mammograms are a series of X-ray pictures of the breast that allow doctors to look for early signs of breast cancer, sometimes up to three years before it can be felt. When breast cancer is found early, treatment is most effective, and many women go on to live long and healthy lives.

When should I get a mammogram?

Most women should have their first mammogram at age 40 and then have another mammogram every one or two years. If you have any symptoms or changes in your breast, or if breast cancer runs in your family, talk to your health care professional. He or she may recommend that you have mammograms earlier or more often than other women.

What happens if my mammogram is abnormal?

If your mammogram is abnormal or more tests are required, do not panic. Many women need additional tests, and most are not diagnosed with cancer. An abnormal mammogram does not always mean you have cancer. It does mean that you will need to have some additional X-rays or other tests before your doctor can be sure. Other tests may include an ultrasound (picture taken of the breast using sound waves) or a biopsy (removing tissue samples to be looked at closely under a microscope). You may be referred to a breast specialist or a surgeon, because these doctors are experts in diagnosing breast problems.

What should I expect during a mammogram?

The mammography machine is a special X-ray machine. One of your breasts will be placed on a plate. Another plate will press down on your breast from above. The plates will hold your breast still while the X-ray is being taken. These steps are repeated to get a view of the other breast. The plates are then turned to get side views of each breast.

Although getting a mammogram only takes a few minutes, you will feel some pressure while the plates are pressing on your breast. Most women find it uncomfortable, and a few find it painful. What you feel depends on the size of your breasts, how much your breasts need to be pressed to get a good view, the skill of the technologist, and where you are in your monthly menstrual cycle, if you are still having periods.

After getting your mammogram, the technologist will check to make sure your X-rays are of good quality. They cannot read the X-ray or tell you the results. A radiologist will read your mammogram. You may receive results immediately, or they will be sent to you and your doctor within a few weeks. If your mammogram is abnormal, you will likely hear from the facility earlier. If you do not receive your results within 30 days, you should contact your health care provider or the mammography facility.

Where can I find more information about breast cancer?

Centers for Disease Control and Prevention:
1-800-CDC-INFO or www.cdc.gov/cancer

National Cancer Institute:
1-800-4-CANCER or www.cancer.gov

American Cancer Society:
1-800-ACS-2345 or www.cancer.org

People Living with Cancer/American Society of Clinical Oncology:
1-888-651-3038 or www.plwc.org

Where can I find a free or low-cost mammogram?

If you have a low income, or do not have insurance, and are between the ages of 40 and 64, you may be able to get a free or low-cost mammogram through the National Breast and Cervical Cancer Early Detection Program in your community. To learn more, call 1-800-CDC-INFO or visit www.cdc.gov/cancer/nbccedp online.

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Flathead County Health Department

We're on the Web:
flatheadhealth.org/healthadmin

THE COALITION FOR A HEALTHY FLATHEAD is a joint effort between the Flathead County Tobacco Use Prevention Program and the Region 1 Comprehensive Cancer Control Program. Tobacco Prevention has a mission to reduce tobacco use by promoting a tobacco-free lifestyle and focuses on changing the way tobacco is used, sold and promoted in Montana; preventing youth from beginning a lifetime of addiction to tobacco products; and helping to protect non-smokers from the hazardous effects of secondhand smoke. Comprehensive Cancer Control has a mission to reduce cancer incidence, morbidity, and mortality, and cancer related health disparities. The program works to bring many partners together, use data and research results to identify priorities among cancer issues, implement evidence-based solutions, and use limited resources efficiently.

To join, contact Wendy Olson at 751-8106, wolson@flathead.mt.gov or Leslie Deck at 751-8107, ldeck@flathead.mt.gov.